1. Name and Address of Reporting Person  
HAINES DANIEL  
(Last)  
(First)  
(Middle)  
4400 BISCAYNE BOULEVARD, SUITE 888  
C/O THE FEMALE HEALTH COMPANY  
(Street)  
MIAMI  
FL  
33137  
(City)  
(State)  
(Zip)  

2. Issuer Name and Ticker or Trading Symbol  
VERU INC. [ FHCO ]  

3. Date of Earliest Transaction (Month/Day/Year)  
08/02/2017  

4. If Amendment, Date of Original Filed (Month/Day/Year)  

5. Relationship of Reporting Person(s) to Issuer  
X 10% Owner  
Chief Financial Officer  

6. Individual or Joint/Group Filing (Check Applicable Line)  
X Form filed by One Reporting Person  

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned  

<table>
<thead>
<tr>
<th>Title of Security (Instr. 3)</th>
<th>Transaction Code (Instr. 8)</th>
<th>Amount of Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>Price (Instr. 4)</th>
<th>Date Exercisable and Expiration Date (Month/Day/Year)</th>
<th>Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>Nature of Indirect Beneficial Ownership (Instr. 4)</th>
<th>Code</th>
<th>Amount or Number of Shares</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock Option 0.2</td>
<td>A</td>
<td>350,000</td>
<td>$0</td>
<td>08/02/2018 08/02/2027</td>
<td>D</td>
<td></td>
<td></td>
<td>350,000</td>
</tr>
</tbody>
</table>

Explanation of Responses:  
1. Options for one-third of the shares vest on each of August 2, 2018, August 2, 2019 and August 2, 2020.  

/s/ Kevin J. Gilbert, Attorney-in-fact  
08/04/2017  

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  
* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).  
Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.  
Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.